

Supporting the legitimate use of firearms, firearms safety, conservation, recreation & marksmanship activities in South Dakota!



Print this form off. Fill in and mail it with your Membership Fee to: SDSSA, c/o Scott Larson 304 W. Prospect Ave Pierre, SD 57501

Please print this form and fill in the information including checking the type of Membership desired. Attach payment and mail to the address above. A Membership Card will be mailed to you.

Membership Type	Cost	Choose One		
Individual Annual Membership	\$10.00			Your NRA Membership #
Individual Life Membership	\$100.00			
Club Annual Membership	\$15.00			
Your Name:				For Membership Year:
Mailing Address:				
City:			State:	Zip:
Phone:	Email:			
Club/Organization Name (if Memb	pership for C	Club):		
Please tell us the type of shooting you a	re interested	d in:		

I hereby apply for membership in the SD Shooting Sports Association. I certify that I am a citizen of the United States and that I am not a member of any group which has as any part of its program the attempt to overthrow the government of the United States or any of its political subdivision by force or violence, that I have never been convicted of a crime of violence and that upon admission to membership, I will abide by the provisions of the Constitution & By Laws of the Association and will faithfully endeavor to fulfill the obligations of good sportsmanship and good citizenship.

Signature___